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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

FEB 1 1 RECO

CANDIDATE COMMITTEE COVER PAGE

CARMELLA SABAUGH MACOMB COUNTY CLERK

FOR OFFICIAL USE ONLY

COVER FAGE		DOOR! ! CLERK			
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statemen	nt covers From: 11/25/0	8 _{to} 12/	31/09	
1. Committee I.D. Number	4. Candidate La	ast Name	First Name	M.I.	
138224	Joseph	Da	avid	M.	
2. Committee Name	, .	t Including District # or Co			
CTE David Joseph					
	 	sidence Macomb			
5. Committee's Mailing Address	1	ame & Residential Addres	iS		
28637 Buckinghamshire	Christine Joseph				
Chesterfield, MI 48047	1	28637 Buckinghamshire			
(700) 040 0440	Cheste	erfield, MI	4 80 4 7		
Area Code and Phone (586) 212-3148	0	,, 1101a, 11.1	700 11		
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phr	one (586) 980-0694			
7. Treasurer's Business Address			Mailing Address (If	the committee has a	
28637 Buckinghamshire	Designated Reco	Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)			
i					
Chesterfield, MI 48047					
Area Code and Phone (586) 980-0694	Area Code and P	Phone			
9. TYPE OF STATEMENT	7 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Tions			
9a. Bra Floation OB Ob Do			2000		
Pre-Election OR 9b. Post-Election		9c. Annual Stateme	ent (AUV) Cov	verage Year)	
		9d. Amendment to 0	Camoaign Statement	(Complete Item 9a, 9b, 9c	
Pre-Election or Post-Election Statement relates to:		or 9e to indicate	which Statement is I	being amended)	
	•	9e. Dissolution of Ca	andidate Committee		
Primary Gene	∌rai i				
Convention	ool	ol Effective Date of Dissolution			
	1				
Special	us	Dhasking this item IN	the second		
Date of Florida, October 1911, and October 1911	,	outstanding debts, includ	ling late filing fees. F	mmittee has no assets or Further, I/We request that if	
Date of Election, Convention or Caucus	Į.	the dissolution cannot be the Reporting Waiver.	granted, that this be	considered a request for	
444	1	Note: The disposition of r	residual funds must t	be reported on Schedule	
A committee that does not have a Reporting Waiver must file all rec	cuired Compaign S	1B and the Summary Pag	ge.		
A committee that does not have a Reporting Waiver must file all rec Schedules. Direct contributions, in-kind contributions, loans, expen If any of the information listed in items 2, 4, 5, 6, 7, or 8 has change	ditures, and outsta	inding debts count against	n Statements must in t the \$1,000 Reportin	nclude all applicable ng Waiver threshold.	
If any of the information listed in items 2, 4, 5, 6, 7, or 8 has change amendment to the Statement of Organization should accompany the before the filling deadline of a required campaign statement, the	is Campaign State	ation was snown on the coment. If a request for a F	ommittee's Statemen Reporting Walver is	t of Organization, an not received on or	
10. Verification: I/We certify that all reasonable diligence was used in	n the preparation of	f this statement and attack	had achadulae (if an	Normal And Albanda and And	
10. Verification: IVWe certify that all reasonable diligence was used in mylour knowledge and belief the contents are true, accurate and cor	nplete.	1 A	neu scriedules (i. a.,	/) and to the best of	
Current Treasurer or Christine Joseph	Vhh.19	to Unal	i	0/0/40	
Designated Record keeper Type or Print Name	Signature	on Todas	Date	2/9/10	
David January	λ	. [1			
_{Candidate} David Joseph	Hand	1000 L	Date	2/9/10	
Type or Print Name	Signature	UT	Date		